

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
INDIAN HEALTH SERVICE**

Refer to: Clinical Quality

ALBUQUERQUE AREA INDIAN HEALTH SERVICE CIRCULAR NO. 2007-01

**RECOGNITION, DOCUMENTATION,
AND REPORTING OF A PATIENT REFUSAL**

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1. **PURPOSE:** This circular establishes a policy for the Albuquerque Area Indian Health Service (AAIHS) to recognize, document, and report a patient refusal for services at the service unit and/or facility level.
2. **REFERENCES:** None.
3. **POLICY:** It shall be the policy of the AAIHS to ensure that policies and procedures in this circular are used as a guide to help identify a refusal of service by a patient. The goals and objectives of this policy will be to: have a positive impact on improving patient care; increase the level of patient access to care; and to identify, document, and record types of patient refusals.
4. **DEFINITIONS:**

Refusal of Service: The basic definition of a "refusal of service" by a patient includes exams, procedures, tests, screenings, or any type of education/counseling. Patients can refuse service via face-to-face communication, telephone call, or any written correspondence (including e-mail). The definition of a patient refusal, hereby, is amended to include:

Two (2) or more consecutive “no-shows” to appointments (also known as Did Not Keep Appointment, DNKA or “broken” appointments) in the same one-year period . This includes if patient does not cancel within the required notification period (as determined by the facility), reschedules existing appointment, or did not physically attend appointment.

Three (3) or more consecutive attempted patient contacts (includes cancellations and attempts to schedule patients) via clinic letter or telephone call, in the same one-year period.

One-year periods include fiscal year (beginning October 1st [previous year] and ending September 30th [current year] or Government Performance Results Act (GPRA) year (beginning July 1st [previous year] and ending June 30th [current year]). Sites that have an appointment policy that allows the tracking of no-show patients (DNKAs) every six months can maintain that procedure. However, for GPRA purposes, only two documented no-shows by the same individual patient to the same clinic per year may be “credited” as a refusal.

Refusals can be for any type of service including exams, labs, tests, medications, measurements (height/weight), counseling, education, procedures, appointment, etc. Refusals must be for the same individual patient - same type of service, same clinic, or same clinical reason.

5. **RESPONSIBILITIES:** It shall be the responsibility of the CEO, Health Center Director, Clinical Director, Director of Nursing, Medical Record Supervisors, and Business Office Managers to ensure compliance with the policies and procedures established in this circular. Patients, having two (2) or more no-shows in the same clinic within a one-year period, will be responsible to follow-up with the facility in order to schedule subsequent appointments. Emergency care will be provided by the facility.

6. **DOCUMENT/TRACKING OF REFUSAL OF SERVICE THROUGH ENCOUNTER FORM:** No-shows (DNKAs), as well as patient contact attempts, must be tracked by Patient Registration (or staff determined by site) in the Resource Patient Management System’s (RPMS) Appointment Management Scheduling Menu and/or manually from the patient’s chart. The “Frequency of No-show” Report, obtained from the Scheduling Menu, can be used to identify patients who have two or more no-shows in the same clinic during the year. Sites not using the RPMS Appointment Management menu will need to determine a process to identify no-shows and refusals.

Once the determination is made that the patient meets the criteria for refusal of service, an encounter form must be created to document that refusal in order for the information to be entered into the RPMS system.

Providers are responsible for documenting refusals on the encounter form. The encounter form must contain the following information:

The type of refusal (ADA Code, CPT, Education Topics, EKG, Exams, ICD Operation/Procedure, Immunization, Lab, Mammogram, Pap Smear,

Measurements [height/weight], Medication/Drug, Radiology Exam, or Skin Tests).

The type of exam, measurement (height/weight), lab test, or immunization, etc.

The date service/exam was refused. If based on no-shows (DNKAs), the provider must use the date of last appointment in which patient was seen.

The name of the provider who documented the refusal.

Comments or reason for the refusal. If based on no-shows (DNKAs), or attempted patient contacts, enter the number of no-shows (DNKAs) that led to the refusal determination.

- 7 **REPORTING OF REFUSAL OF SERVICE IN RPMS:** Refusal of service must be entered into the RPMS system at the service unit/facility level. After the encounter form is completed, data entry clerks and patient registration staff (or as determined by site) are responsible for entering the information in the Patient Care Component (PCC) Data Entry Menu or the Electronic Health Record (EHR) menu. If documented in the PCC data entry menu, staff should use the “ENT – Data Entry” or “MIN-MNEMONIC” options on the menu.

In this menu option, the MIN-MNEMONIC “REF” must be entered to indicate a refusal. Next, information entered into PCC must include:

- The type of refusal (ADA Code, CPT, Education Topics, EKG, Exams, ICD Operation/Procedure, Immunization, Lab, Mammogram, Pap Smear, Measurements [height/weight], Medication/Drug, Radiology Exam, or Skin Tests).

The type of exam, measurement (height/weight), lab test, or immunization, etc.

The date service/exam was refused. If no-shows (DNKAs) are used, then enter last date of appointment that patient was seen.

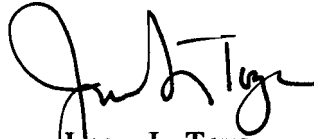
The name of the provider who documented the refusal.

Comments or reason for the refusal. If based on no-shows (DNKAs), or attempted patient contacts, the number of no-shows (DNKAs) that led to the refusal determination must be entered into RPMS.

For reporting refusals in the EHR, see updated EHR manual or instructions.

8. **SUPERSEDES**: None.

9. **EFFECTIVE DATE**: This circular is effective upon date of signature and shall remain in effect until canceled or superseded.

A handwritten signature in black ink, appearing to read 'James L. Toya', is positioned above the printed name.

James L. Toya
Director

Albuquerque Area Indian Health Service